

## Information Update from the Office of the Chief, Navy Medical Corps

The following information is submitted for your information. Additional information can be obtained by contacting the Office of the Chief, Medical Corps (202-762-3060/3063/3062/ DSN: 762-3060/3063/3062). Please disseminate this information to the widest possible distribution.

1. Pay Problems: A number of interns and newly reported officers had problems establishing a pay record and getting their correct pay. This occurs most years, but was particularly problematic this past summer. In order to establish a pay record, the following must be received at BUPERS Code 822:
  - a. Officer's Oath of Office form (the form they sign to accept their rank) for their current rank and for their rank as an Ensign if coming from an HPSP or USUHS accession program.
  - b. G-02 Form (this is a form that PSD initiates which essentially says that the officer has checked on board).
  - c. Copy of the officer's DD-214 (Discharge Paper) if the officer had prior active duty service.

The above documents must be faxed to BUPERS Code 822 at 901-874-2622. Please ensure that there are current contact numbers and/or e-mail address(es) to contact the officer should there be any questions by the BUPERS staff. The Point of Contact at BUPERS for questions is 901-874-3241/ DSN: 882-3241.

2. There is a new CME Program Manager at NMETC. She can be reached at 301-295-0453. Her assistant can be contacted at: 301-295-0649.
3. As of January 2003, the Medical Corps is 101.8% manned (4030 physicians and 3957 billets). In the past, the Medical Corps could commission physicians of all specialties. In FY 03 we can only bring in 13 fully trained physicians. We are only looking for physicians in our critically short specialties to fill these 13 positions. Similarly, for every physician we allow to stay on in a "retired retained" status, we decrease our direct accessions by one. As a result, we are not able to recommend people for retired retained as we did in the past. If you have questions regarding this, please contact Deputy, Chief of the Medical Corps at 202-762-3063.
4. The MEPRS code for Specialty Leader activities is EBDF. Time spent in Specialty Leader activities is appropriately coded using this designation.
5. Credentials are not automatically transferred when someone checks out of a command. Three months prior to leaving a command, detaching providers should alert the Credentials Department so that privileging can be closed out and transferred to the officer's next command.
6. The Health Care Advisory Board at <http://www.advisoryboardcompany.com>, offers a wide variety of research services including best practices research studies, executive education, daily on-line executive briefings, original executive inquiry research support, best practices installation support and on-line access to an exhaustive research warehouse. Membership is open to anyone in Navy Medicine. If you have a Navy e-mail address (i.e. \*\*\*.med.navy.mil) you can

enroll directly from the website. When asked for city type in "Washington"; state type in "District of Columbia;" organization type in "Bureau of Medicine and Surgery." If you have questions, call 202-762-3334.

7. During a review of an unfortunate patient care outcome, it was noted that the patient was actually seen three times in the Emergency Department for the same symptoms before hospitalization was considered. Please remind your staff and trainees that repeat visits to the ER for the same complaints may indicate a closer inspection of the patient and consideration of additional evaluation.
8. CO/XO Screening: Captains and Captain (select) officers will receive a letter in the next several months asking if they want to be screened for CO/XO. In the past, a letter of endorsement from an officer's Commanding Officer was requested, but not necessarily mandatory. This year, a CO's endorsement will be required. CO's will be asked to specifically comment on various leadership attributes. No application will be screened unless a CO's endorsement is in the package.
9. Surgeon General's Specialty Leader Conference: The Spring Specialty Leaders' Conference will be held 1 – 3 April. This year in addition to being a combined conference with Medical, Dental, Nurse and Medical Service Corps in attendance like last year, Reserve Specialty Leaders as well as Enlisted Technical Leaders will be invited. Commands are responsible for funding Specialty Leader/Enlisted Technical Leader TAD to this conference.
10. The DOD Pharmacy and Therapeutics Committee is working on a Uniform Formulary. Information from the DoD Pharmacoeconomic Center (PEC) is available at: [http://www.pec.ha.osd.mil/Updates/0302web/Nov-Dec\\_02\\_Update\\_Page\\_1.htm](http://www.pec.ha.osd.mil/Updates/0302web/Nov-Dec_02_Update_Page_1.htm) . The PEC is interested in getting physician and pharmacist input in order to make the most clinically relevant formulary decisions. When asked for input, please encourage your providers to support the work of the PEC.